UNITED STATES DISTRICT COURT

for the

District of Hawaii

TRAVELERS PROPERTY CASUALTY COMPANY OF AMERICA Plaintiff V. FIRST SPECIALTY INSURANCE CORPORATION; EVEREST NATIONAL INSURANCE COMPANY Defendant)))))	Civil Action No.			
SUMMONS IN A CIVIL ACTION						
To: (Defendant's name and address) FIRST SPECIALTY INSURANCE CORPORATION c/o Colin M. Hayashida, Insurance Commissioner Insurance Division, Dept of Commerce & Consumer Affairs State of Hawaii 335 Merchant Street, Room 213 Honolulu, Hawaii 96813						
A lawsuit has been filed against you.						
Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: Wesley H.H. Ching, Esq. Sheree Kon-Herrera, Esq. Fukunaga Matayoshi Ching & Kon-Herrera, LLP 841 Bishop Street, Suite 1200 Honolulu, Hawaii 96813						
If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.						
			CLERK OF COURT			
Date:						
			Signature of Clerk or Deputy Clerk			

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PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

	This summons for (nan	ne of individual and title, if any)				
was re	ceived by me on (date)	·				
	☐ I personally served	the summons on the individual ar	t (place)			
			on (date)	; or		
	☐ I left the summons	at the individual's residence or us	sual place of abode with (name)			
	, a person of suitable age and discretion who resides there,					
	on (date), and mailed a copy to the individual's last known address; or					
	☐ I served the summons on (name of individual), who designated by law to accept service of process on behalf of (name of organization),					
			on (date)	; or		
	☐ I returned the sumn	nons unexecuted because		; or		
	☐ Other (specify):					
	My fees are \$	for travel and \$	for services, for a total of \$	0.00		
	I declare under penalty	y of perjury that this information	s true.			
_						
Date:			Server's signature			
			Printed name and title			
			Server's address			

Additional information regarding attempted service, etc: